REQUEST FOR ANCILLARY SERVICES

Requests by retained attorneys for ancillary services at public expense, including appointment of investigators, experts, or others shall be presented for consideration and order by the Assistant Presiding Judge. Requests for ancillary services shall include the following:

- Attorney's declaration (original and two copies) in support of the request that contains:
 - Summary of the charges and overview of the case
 - If applicable, disclosure of attorney's representation of defendant in any other legal action
 - Justification for appointment of investigator, expert, or service to be performed
 - Requests for appointment of investigator must include an investigation plan containing outline of duties to be performed and relevance of duties to the case
 - Attorney's estimate of the number of hours necessary to complete investigation
- A copy of the attorney/client retainer agreement
- A copy of the complaint, information, or indictment
- A completed financial statement of defendant
- If the defendant did not fund the retainer, a completed financial statement of any party (or parties) who funded the retainer
- For appointment of expert witness, the *curriculum vitae* of the expert
- Order for Appointment (original and two copies)
 - Order for appointment of investigator or order for appointment of experts must:
 - Be directed to: San Luis Obispo Court Fiscal Services
 - Contain full name, professional designation or professional license number of expert
 - Contain court approved hourly and mileage (if applicable) rates, along with a cap amount

Superior Court of C San Luis Obispo Branch, Coun 1050 Monterey Street, Room 220 Grover Beach Branch, 214 Sou Paso Robles Branch, 549 10th	FOR COURT USE ONLY					
THE PEOPL	E OF THE STATE OF CALIFO	RNIA				
	vs.	Plaintiff,				
		Defendant,				
FINANCIAL STATEMENT			Case Number			
Name:		Date of Bir	rth:			
Address:		ode:				
Telephone # (Home):		e#(Work):				
Social Security #:	Driver's License #:					
Defendant's Occupation:						
Employer's Name:	Address:					
If Defendant is not currently	workina:					
•	Name of Last Employer:Last Employment Date:					
	Married Di		parated			
	pouse's Name: Date of Birth:					
Spouse's Employer/Address: _						
Spouse's Social Security #:	Driver's License #:					
Dependants:						
Name	Address	Relationship	Age			

Monthly Financial Statement

Monthly Income:		Assets:	
Gross Salary (wages)	\$	Cash (Checking, Savings, Money Market Accts:	\$
Spouse's Gross Salary (wage)		Real Estate – Market Value	
Jnemployment/Disability		Furniture and Fixtures	
Veterans Benefits		Car(s) – Resale Value	
Other Income (Itemize):		Personal Property (Boats, Cameras, etc.)	
		IRA's	
		Stocks, Bonds, etc. – Market Value	
TOTAL MONTHLY INCOME:	\$	Other Assets (Itemize):	
Monthly Expenses: (include spouse)			
Mandatory Payroll Deductions:	\$		
Voluntary Payroll Deductions:			
Rent or Mortgage Payment:			
Taxes and Assessments:		TOTAL ASSETS:	\$
Food:			
Clothing:		Liabilities:	
Utilities (Gas, Electric, Water, Phone)		Balance Due on Real Estate:	\$
Car Payment(s):		Balance Due on Personal Property:	
Gasoline (Transportation Expense)		Attorney Fees Due:	
Insurance Premiums:		Other Creditors (itemize):	
Child Support or Alimony:			
Contributions:			
Other expenses (itemize):			
TOTAL MONTHLY EXPENSES	\$	TOTAL LIABILITIES:	\$

DECLARATION OF DEFENDANT

I declare under penalty of perjury that	at the above is a true and	correct statement of my financial s	tatus. This declaration is
executed on	, 20	(date) at	(city), California
County of	·		
		Signature of Defendant	